



Date Received: _____
Case Number: _____

LEGISLATIVE ETHICS COMMITTEE
COMPLAINT FORM

The Legislative Ethics Committee has the authority to investigate complaints against sitting legislators for alleged violations of matters covered by Chapter 138A of the North Carolina General Statutes (the State Government Ethics Act) or Article 14 of Chapter 120 of the North Carolina General Statutes (the Legislative Ethics Act). Examples of matters covered by the State Government Ethics Act include use of public position for private gain; conflict of interest while taking legislative action; or receipt of a prohibited gift. Examples of matters covered by the Legislative Ethics Act include bribery; unethical personnel-related action; disclosure of confidential information; a violation of the criminal law by a legislator while acting in the legislator's official capacity as a participant in the lawmaking process; violation of an Ethical Principle and Guideline adopted by the Legislative Ethics Committee; or violation of a formal written advisory opinion adopted by the Legislative Ethics Committee.

Submit the completed sworn complaint to:

Cochairs, Legislative Ethics Committee
c/o Legislative Analysis Division, North Carolina General Assembly
300 N. Salisbury Street
Room 545, Legislative Office Building
Raleigh, North Carolina 27603-5925

COMPLAINANT'S INFORMATION

(Please type or print clearly.)

The Legislative Ethics Committee cannot accept anonymous complaints. Please provide your name, address, county of voter registration, and telephone number.

Printed Name: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Telephone Number: (_____) _____

4. Provide the name(s) and contact information, if known, of any other person(s) who may have information that would support your claim.

5. State whether the current legislator, and conduct described in Question 3 above, are or have been the subject of another complaint or proceeding of any kind. If so, state the place when and where the other complaint was filed and its current status, if known.

SWORN COMPLAINT

I hereby swear or affirm, under penalty of perjury and other penalties established by North Carolina law, that the information provided in this complaint is true, correct, complete, and of my own personal knowledge, or if not, I believe the information to be true based upon:

Signature

Date

STATE OF NORTH CAROLINA
COUNTY OF _____

SWORN TO (or affirmed) and subscribed before me this day by: _____

Date: _____ Official Signature of Notary Public: _____

Typed or Printed Notary Public Name: _____

My Commission Expires: _____

(Official Seal)